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	(Fees pursuant to the Consolidation appropriations A						_	
	on Number	Filed November 15, 2001	November 15, 2001					
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	TIC OR DERMATOLOGICAL IMPREGNAT	ED WIPES Examiner	······································					
Art Unit 1617		Jennifer M. Kim		1 : 1 - 1		ntific		
application	request under the provisions of 37 CFR 1.136(atom.						'	
The requ	ested extension and appropriate fee are as follo	Ws (check time period of Fee Sn	nall Entit	y Fee	Орнас	, icc).		
į	○ One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	20.00	<u>)</u>		
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		_		
	☐ Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	<u> </u>	-		
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		-		
	Five months (37 CFR 1.17(a)(5))	\$2160	\$108	30 \$		_		
	Applicant claims small entity status. See 3'	7 CFR 1.26.						
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1 an	n the 🔲 applicant/inventor							
	assignee of record of the entire inter Statement under 37 CFR 3.73(b)	rest. See 37 CFR 3.71.) is enclosed. (Form P7	ro/sb/96	5).)IPE/	MAY 2		
	attorney of agent of record. Registra	ation Number			JC	O	<u> </u>	
	☑ attorney or agent under 37 CFR 1.3	34(a).		ě	S/M	200		
	Registration number if acting under	r 37 CFR 1.34(a) <u>33,</u>	141			67		
	Signature			May 25, 2005 Date				
	KURT G. BRISCOE			(212) 808-070	00			
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NOTE: S on signate	signatures of all the inventors or assignees of record of the entir are is required, see below.	e interest or their representative	e(s) are requi	ired. Submit multiple	forms i	f more tl)AN	
h	al of forms are submitted. of information is required by 37 CPR 1.136(a). This information is required to obtain	tain or retain a benefit by the public which	is to file (and by	y the USPT() to process) an	application	Confiden	gratity is	
governed by 35 Time will vary Information Of	of information is required by 37 CPN 1.30(3). This information is required to our 50 U.S. C. 122 and 37 CPR 111 and 1.14 This collection is estimated to take 6 min depending upon the needs of the individual case. Any comments on the amount of fifteer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1650. Alexandrin. VA 22313-1450. If you need assistance in completin,	ates to complete, including gathering, pre- time you are required to complete this for v 1450 Alexandria, VA 22313-1450. DO	For and/or augge NOT SEND F&	estions for reducing this burd SES OR COMPLETED FOR	en, should b	e sent to t	he Chiel	

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